## BEST AVAILABLE COPY

Effective December 29, 1999									9/540128					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY			
FO	R	NUMBE	NUMBER FILED		NUMBER EXTRA			ATE	FEE		RATE	FEE		
BA	SIC FEE								345.00	OR		690.00		
TO	TAL CLAIMS	1	/8 minus 20=			*			X\$ 9=		X\$18=			
IND	EPENDENT CLAIM	ıs	6 minus 3 =			* 3			X39=		X78=	234		
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	924		
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SN	SMALL ENTITY			OTHER THAN SMALL ENTITY			
ENT A	F	CLAIMS REMAINING AFTER MENDMENT		HIGHES NUMBER PREVIOUS PAID FOI	T R SLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RAŢE	ADDI- TIONAL FEE		
AMENDMENT	Total *	$\nabla$	Mihule V			=	X	S 9=		OR	X\$18=			
	Independent *			***		=	X	39=	·	OR	X78=			
	FIRST PRESENTA	ATION OF MU	DETIPLE DEPE	NDENT C	LAIM		+1	30=		OR	+260=			
ADI								TOTAL		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								I. FEE			ADDII. 1 EE			
ENT B	9 9 03	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	T R SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
<b>IENDMENT</b>	Total +	2	Minus	A()		=	X	9=		OR	X\$18=	15		
AME	Independent *		Minus	••• (0	)	=	X	39=		OR	X78=	84		
	FIRST PRESENT	ATION OF MU	JLTIPLE DEPE	NDENTC	LAIM		+1	30=		OR	+260 <del>-</del> 7			
								TOTAL T. FEE		OR	TOTAL ADDIT/FEE	103		
(Column 1) (Column 2) (Column 3)										\	Mi			
AMENDMENT C	1215114	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RAT	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N N	Total *	21_	Minus	<u> </u>	<del>-1</del>	=	X	9=		OR	X\$18=			
AME	Independent *	TATION OF M	Minus	***	A INA	=	X	39=		OR	X78=			
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							30=		OR.	1260=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE										OR	TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

Application or Docket Number